File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319



1-641-394-5541

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FOR INSTRUCTIONS, SEE BACK OF FORM

Fax: 515-281-4073	DISCLOSURE SUMMARY PAGE		2008 NGA	26 AM 11:1
COMMITTEE NAME (Must be	e same as on Statement of Organization)		20001101	
IMPORTANT: Indicate by # type	FOR AUDITOR of committee you are reporting for:	_	DR-2	DISCLOSURE
I (4 Journey Central Committee ()	Standing for Retention Candidate (2) State PAC (3) State Party 5) County Candidate (6) City Candidate (7) School Board or Other Poly PAC (9) City PAC (10) School Board or Other Political Subdivision	litical Fo	Rev. 07/2007) or Office Use Only	
CANDIDATE COMMITTEES Candidate Name JUDY A BA Office Sought CHICKASAW COU	BCOCK Political Party (if applicable No PARTY	e) Lo Sc Co	anned	
GUAL O BAL SIGNATURE OF PERSON FIL	/ LELF HOILE	Ð (<u>)</u> _	//- 26-0 DATE SIG	8 BNED
(re		ION /(2)NON-E by# //	LECTION YEAR	₹.
CHECK IF AMENDMENT TO	REPORT DATED	Local Comm	nittees, enter Date	of Election
Check if this is final (termina (You must continue to	ution) report and attach Notice of Dissolution Form DR-3. offile reports until a DR-3 is filed.)	which Election	MBER U. ccal Committees, e on is held ICKASAU)	·
STATEMI	ENT OF CASH ON HAND			
CASH ON HAND at the beginn committee. This amo	ing of the reporting period. (Total of all funds held by the unt MUST be the same as the cash on hand at the end eriod or must be zero if this is first report filed.)	S	36.	71
ADD TOTAL MONEY	TAKEN IN THIS PERIOD	•		-
Schedule A: Cash Co	ontributions total (Attach Schedule A) (*also see in-kind below)		<u> 300</u>	.00
Schedule F: Loans R	eceived total (Attach Schedule F)			
Schedule H: Total Sa	les of Campaign Property (Attach Schedule H)			
(Schedule H	applies to Candidates' Committees Only)			
SUBTRACT TOTAL I	SUB-TOTAL MONEY SPENT THIS PERIOD	\$		
Schedule B: Expendit	tures total (Attach Schedule B) (**also see debts and loans belo payments total (Attach Schedule F)		_336	.71
	this reporting period (if final report balance must be zero))
	ule D - Attach Schedule D)			
	rom Schedule E - Attach Schedule E)	-		
	m Schedule F - Attach Schedule F)			
ONSULTANT BREAKDOWN		·····•••••••••••••••••••••••••••••••••		<u> </u>
ANDIDATE COMMITTEES OF	-			•
	ERTY (From Schedule H - Attach Schedule H)	\$		
	t a reconciled campaign account bank statement in January of e	•		

AMENDING FORM

For Instructions, See Back of Form SCHEDULE **CONTRIBUTIONS -- MONEY TAKEN IN** MONETARY (Including candidate's personal funds) (Rev. 07/03) RECEIPTS COMMITTEE NAME (Must be same as on Statement of Organization) CHECK THIS BOX IF

BABCOCK FOR AUDITOR STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of Information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FO FUND- RAISEF
10/31/08	ID# CK#	DOUGLAS V JUDY BABCOCK 1997 235TH ST NEW HAMPTON, IA 50659		\$	INCOM
	ID# CK#	HEW HAMIPTON, LA 50659	SELF	300 -	<u> </u>
	ID#				
	CK#				
	CK#				
	ID#				
	ID#				
	CK#				<u> </u>
	CK#				
	ID# CK#		7 11		
	ID#				
	CK#				<u> </u>
	CK#				
		TOTAL (if last page o	SUB-TOTAL	\$ 300 -	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B	MONETARY
(Rev. 07/03)	EXPENDITURES
	CK THIS BOX IF INDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) BABCOCK FOR AUDITOR NAME AND ADDRESS TO WHOM CANDIDATE **PURPOSE** AMOUNT DATE ID NUMBER **EXPENDITURE** (DESCRIBE TRANSACTION) **EXPENDED EXPENDED** (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# OFFICE WOALD CAMPAIGN BROCHURE CK# 1017 23 E MAIN ST \$ 182.27 NEW HAMPTON, IA MAILING ID# NEW HAMPTON TRIBUNG THANK-YOU ADS 10 N CHEST NUT CK# /0/8 NEW HAMPTON, IA 65.04 ID# 11/1/08 NASHUA REPORTER CK# 1019 216 MAIN ST THANK-40U AD NEW HAMPTON, IA 8.00 ID# JUDY BABCOCK 1997 235#ST NEW HAMPTON, IA CAMPAIGN CK# DISSOLUTION 81,40 ID# CK# ID# CK# ID# CK# ID# CK#

SUB-TOTAL	\$

TOTAL (if last page of this schedule)

\$ 336.71

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(I).)

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